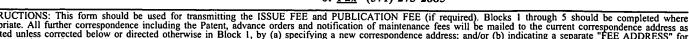
PART B - FEE(S) TRANSMITTAL

Hete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885



INSTRUCTIONS: This for appropriate. All further cor indicated unless corrected I maintenance fee notification	rm should be used for transm respondence including the Par below or directed otherwise in is.	nitting the ISSU tent, advance or Block I, by (a	JE FEE and Piders and notifi o) specifying a	UBLIC cation new c	CATION FEE (if req of maintenance fees orrespondence addres	uired). Blocks will be mailed s; and/or (b) in	1 through 5 s to the current dicating a sep	hould be com correspondent arate "FEE AD	pleted where ce address as DDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
	90 03/24/2006					ŭ		mission		
BAKER & HOST WASHINGTON S 1050 CONNECTION			Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmital is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.							
WASHINGTON, I	DC 20036-5304							(D	epositor's name)	
									(Signature)	
			•			-			(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN		TOR	ATTORNEY DOCKET NO.		CONFIRMATION NO.		
09/944,106	09/944,106 09/04/2001		Troy J. Liebl			114293-1623		1742		
	PPARATUS AND METHOD	·		·						
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PL	JBLICATION FEE	TOTAL FEE(S) DUE		DATE DUE		
nonprovisional	nonprovisional NO \$14		0		\$300	\$1700		06/26/2	2006	
EXAMINER		ART UN	ART UNIT C		ASS-SUBCLASS					
CHANG, JUNGWON		2154			701-029000					
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) SPX Corporation Charlotte, NC										
Please check the appropriate	assignee category or categorie	s (will not be pr	inted on the pat	ent) :	☐ Individual 🖰 C	Corporation or o	ther private gro	oup entity 🔲	Government	
4a. The following fee(s) are Issue Fee Publication Fee (No so Advance Order - # of	b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2036 (enclose an extra copy of this form).									
	(from status indicated above) MALL ENTITY status. See 37	CFR 1.27.	_		longer claiming SMA					
The Director of the USPTO NOTE: The Issue Fee and Pu	is requested to apply the Issue ublication Fee (if required) will ords of the United States Patent	Fee and Publicat	tion Fee (if any)	or to	re-apply any previous aan the applicant; a reg	sly paid issue fee gistered attorney	to the applica or agent; or th	ation identified ne assignee or o	above. other party in	
Authorized Signature			Date	2086/NBEYEN	ノЮ		09944106			
Typed or printed name	01 FC:1561 / 1400,00 DA RegisGat 5G 41504 4 8 00 100 DA 03 FC:8001 9,00 DA									
This collection of informatio an application. Confidentiali submitting the completed ap this form and/or suggestions. Box 1450, Alexandria, Virgi Alexandria, Virginia 22313-	n is required by 37 CFR 1.311, ty is governed by 35 U.S.C. 12 plication form to the USPTO. for reducing this burden, shou nia 22313-1450. DO NOT SE 1450.	The information of the control of th	n is required to 1.14. This colle depending upor Chief Informa COMPLETED F	obtain ction is n the i tion O ORM	or retain a benefit by s estimated to take 12 ndividual case. Any c fficer, U.S. Patent and S TO THIS ADDRES	the public whic minutes to com omments on the I Trademark Off S. SEND TO: C	h is to file (and uplete, including amount of the fice, U.S. Depo commissioner	I by the USPTO og gathering, prome you require artment of Confor Patents, P.O.	to process) reparing, and to complete imerce, P.O. D. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.